

Application Data Sheet

## Application Information

Application Type:: Regular  
Subject Matter:: Utility  
Suggested Classification::  
Suggested Group Art Unit::  
CD-ROM or CD\_R?:: None  
Number of CD disks::  
Number of copies of CDs::  
Sequence Submission:: No  
Computer Readable Form (CRF)?:: No  
Title:: COMBINATION THERAPIES EMPLOYING A  
COMPOSITION COMPRISING A HMG COA  
REDUCTASE INHIBITOR AND A VITAMIN B6  
RELATED COMPOUND  
Attorney Docket Number:: 12695.0037USWO  
Request For Early Publication:: No  
Request For Non-Publication:: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 12  
Small Entity:: Yes  
Latin Name::  
Variety Denomination Name::  
Petition Included:: No  
Petition Type::  
Licensed US Govt. Agency::  
Contract or Grant Numbers::  
Secrecy Order in Parent Appl.?:: No

## Applicant Information

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: CANADA  
Status:: Full Capacity  
Given Name:: Albert  
Middle Name::  
Family Name:: FRIESEN  
Name Suffix::  
City of Residence:: Winnipeg  
State or Province of Residence:: Manitoba  
Country of Residence:: Canada  
Street of mailing address:: 77 Shorecrest Drive  
City of mailing address:: Winnipeg  
State or Province of mailing address:: Manitoba  
Country of mailing address:: Canada  
Postal or Zip Code of mailing address:: R3P 1P4

## Applicant Information

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: CANADA  
Status:: Full Capacity  
Given Name:: Ahmad  
Middle Name::  
Family Name:: KHALIL  
Name Suffix::  
City of Residence:: Winnipeg  
State or Province of Residence:: Manitoba  
Country of Residence:: CANADA  
Street of mailing address:: 121 Gobert Crescent  
City of mailing address:: Winnipeg  
State or Province of mailing address:: Manitoba

Country of mailing address:: CANADA

Postal or Zip Code of mailing address:: R2N 2Z3

### Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: CANADA

Status:: Full Capacity

Given Name:: Marjorie

Middle Name::

Family Name:: ZETTLER

Name Suffix::

City of Residence:: Winnipeg

State or Province of Residence:: Manitoba

Country of Residence:: CANADA

Street of mailing address:: Apt #1, 141 River Avenue

City of mailing address:: Winnipeg

State or Province of mailing address:: Manitoba

Country of mailing address:: CANADA

Postal or Zip Code of mailing address:: R3L 0A8

### Correspondence Information

Correspondence Customer Number:: 23552

### Representative Information

Representative Customer Number::	23552
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### Domestic Priority Information

Application::	Continuation Type::	Parent Application::	Parent Filing
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Initial 06/23/06

			Date::
This Application	National Stage of	PCT/CA2004/002196	12/23/2004
PCT/CA2004/002196	Claims Benefit of	60/531605	12/23/2003
PCT/CA2004/002196	Claims Benefit of	60/586215	07/09/2004

### Assignee Information

Assignee Name:: Medicure International Inc.  
 Street of mailing address:: 4-1200 Waverly Street  
 City of mailing address:: Winnipeg  
 State or Province of mailing address:: Manitoba  
 Country of mailing address:: CANADA  
 Postal or Zip Code of mailing address:: R3T 0P4